

DECLARATION — Power of Attorney/Authorization of Agent

I/we hereby appoint practitioners at Customer Number

23892



as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please direct all correspondence for the above-identified application to the above-mentioned Customer Number.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR : A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Thomas W.	Family Name or Surname	Mossberg
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Inventor's Signature	<i>Thomas W Mossberg</i>			Date	June 20, 2003
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Eugene Residence: City	OR State	US Country	US Citizenship
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Mailing Address LightSmyth Technologies, Inc. 860 West Park, Suite 250

Eugene City	OR State	97401 ZIP	US Country
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NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
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Inventor's Signature				Date
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Residence: City	State	Country	Citizenship
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Mailing Address

City	State	ZIP	Country
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Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) attached hereto.

**COMBINED DECLARATION
AND
POWER OF ATTORNEY/
AUTHORIZATION OF AGENT**

Declaration Submitted with Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	LTSM01DV1
First Named Inventor	Mossberg
COMPLETE IF KNOWN	
Application Number	
Filing Date	
Art Unit	
Examiner Name	

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Holographic spectral filter

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) [redacted] as United States Application Number or PCT International

Application Number [redacted] and was amended on (MM/DD/YYYY) [redacted] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
[redacted]	[redacted]	[redacted]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
[redacted]	[redacted]	[redacted]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
[redacted]	[redacted]	[redacted]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
[redacted]	[redacted]	[redacted]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet attached hereto: